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Approved for use through 9/30/98
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

700 100 101			Attornov Dooks		5-00029					
PTO/SB/01			Attorney Docke							
(8/96)				First Named Inventor David W. Mortara						
DECLA	\mathbf{N}		COMPLETE IF KNOWN							
Declaration (OR 1	Declaration	Application Nu	mber						
Submitted with Subm		Submitted af	ter Filing Date							
		Initial Filing	Group Art Unit							
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As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
METHOD AND APPARATUS TO OPTIMALLY MEASURE CARDIAC DEPOLARIZATION/REPOLARIZATION INSTABILITIY										
(Title of the Invention)										
the specification of which is attached hereto										
OR										
□ was filed on (MM/DD/YYYY) as United States Application Number or PCT International										
Application Number		and was an	nended on (MM/DD/	YYYY)						
(if applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.										
I hereby claim foreign priority	benefits under	Title 35, United	States Code §119(a)-(d) or	§365(b) of any foreign	application(s) for patent or inventor's					
certificate or 8365(a) of any P	CT internation:	al application wh	ich designated at least one	country other than the	United States of America, listed below and					
have also identified below, by	checking the be	ox, any foreign a	pplication for patent or inv	entor's certificate, or o	f any PCT international application having					
a filing date before that of the	application on v	which priority is	claimed.							
Prior Foreign	Cou	ntry	Foreign Filing Date	Priority Not	Copy Attached?					
Application Number(s)		ŀ	(MM/DD/YYYY)	Claimed	YES NO					
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Additional foreign application numbers are listed on a supplemental priority sheet attached hereto: I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed										
	it under Titl	e 35, United S	States Code §119(e) o	t any United State	s provisional application(s) listed					
below.			·							
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DECLARATION													
I hereby claim the benefit	I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any												
PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the										e subject matter of			
such of the claims of this	polication is n	nt disclose	ed in the	prior Un	ited S	tates or l	PCI.	intern	iationa	пар	pucation in the		
manner provided by the first paragraph of Title 35. United States Code \$112. I acknowledge the duty to disclose													
information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.													
	anon ar	Parent Filing Date				Parent Patent Number							
U.S. Parent Application Number	PCT Parent	Number		(MM/DD/YY					(if applicable)				
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☐ Additional U.S. or PC	T international	application	n numb	ers are lis	sted or	a suppl	lemer	tal pr	nority	she	et attached hereto.		
As a named inventor, I he	reby appoint th	e followir	ng attori	iey(s) and	lor ag	gent(s) to	pros	ecute	this a	ppli	cation and to transact		
all business in the Patent and Trademark Office connected therewith:													
Name	Registi		1	Name					r		imber		
	Num		TC 3.	ward R. V	Villia-	ne Ir					5,057		
Glenn O. Starke	17,0 17,4			ward R. veeph D. K.							0,689		
Eugene R. Sawall	20,3										5,434		
Daniel D. Fetterley				Matthew E. Corr William L. Falk							7,709		
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Michael E. Taken	28,1												
Joseph J. Jochman, Jr.	25,0					ĺ							
Andrew S. McConnell	32,2		1										
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☐ Additional attorney(s)	and/or agent(s) named c	n a sup	plemental	sheet	attache	d here	eto.					
☑ Please direct all corre	spondence	Name	Joseph	D. Kubo	rn	•							
to:													
	es, Starke & Sa												
	onsin Avenue,					Zip	522	02.41	78				
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Country United States I hereby declare that all s	4040morts	Telepho	f my or	m knowle	yae a	re true 21	nd the	at all	statem	ents	made on information		
I hereby declare that all s and belief are believed to	he true: and f	o notem 0.	t these s	tatements	were	made w	ith th	ie kno	wlede	e th	at willful false		
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States Code and that such	n willful false s	tatements	may ied	pardize t	he val	lidity of	the a	pplica	tion o	r an	y patent issued		
States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole or First In	ventor:	A petitio	n has be	en filed f	or this	unsigne	ed inv	ventor					
Given		Middle		Family	T	_							
Name David		Initial	w.	Name	Mo	rtara							
Townstor's													
Signature Dave Workers Date Huly 31, 2000													
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City Marci Imis													
Additional inventors are being named on supplemental sheet(s) attached hereto.													